

Fill in this information to identify your case:

United States Bankruptcy Court for the:

EASTERN DISTRICT OF NORTH CAROLINA

Case number (if known) _____

Chapter you are filing under:

☒ Chapter 7☐ Chapter 11☐ Chapter 12☐ Chapter 13☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself**About Debtor 1:****About Debtor 2 (Spouse Only in a Joint Case):****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Steven

First name

Dale

Middle name

Bring your picture identification to your meeting with the trustee.

Deaton

Last name and Suffix (Sr., Jr., II, III)

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names and any assumed, trade names and *doing business as* names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-2788

Debtor 1 **Steven Dale Deaton**

Case number (if known)

About Debtor 1:**About Debtor 2 (Spouse Only in a Joint Case):**

4. **Your Employer Identification Number (EIN), if any.**

EIN

EIN

5. **Where you live**

**12201 Beestone Lane
Raleigh, NC 27614**

Number, Street, City, State & ZIP Code

Wake

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. **Why you are choosing this district to file for bankruptcy**

Check one:

- ☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- ☐ I have another reason.
Explain. (See 28 U.S.C. § 1408.)

Check one:

- ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
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Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Steven Dale Deaton

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one.* (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.
- ☒ Chapter 7
- ☐ Chapter 11
- ☐ Chapter 12
- ☐ Chapter 13
-
8. **How you will pay the fee** ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.
-
9. **Have you filed for bankruptcy within the last 8 years?** ☒ No.
- ☐ Yes.
- | | | |
|----------------|------------|-------------------|
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
-
10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** ☒ No
- ☐ Yes.
- | | |
|-----------------------------|---------------------------|
| Debtor _____ | Relationship to you _____ |
| District _____ | When _____ |
| Case number, if known _____ | |
| Debtor _____ | Relationship to you _____ |
| District _____ | When _____ |
| Case number, if known _____ | |
-
11. **Do you rent your residence?** ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **Steven Dale Deaton**

Case number (if known)

Part 3: Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?**☒ No. Go to Part 4.☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☒ No. I am not filing under Chapter 11.☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.☐ Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**☒ No.☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 **Steven Dale Deaton**

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

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I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Steven Dale Deaton**

Case number (if known)

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?	16a.	Are your debts primarily consumer debts? <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> No. Go to line 16b. <input type="checkbox"/> Yes. Go to line 17.
	16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. <input type="checkbox"/> No. Go to line 16c. <input checked="" type="checkbox"/> Yes. Go to line 17.
	16c.	State the type of debts you owe that are not consumer debts or business debts

17. Are you filing under Chapter 7?	<input type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18. <input checked="" type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?		

18. How many Creditors do you estimate that you owe?	<input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input checked="" type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000
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19. How much do you estimate your assets to be worth?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input checked="" type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
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20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input checked="" type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
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Part 7: Sign Below**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Steven Dale Deaton**Steven Dale Deaton**

Signature of Debtor 1

Signature of Debtor 2

Executed on **August 30, 2023**
MM / DD / YYYYExecuted on _____
MM / DD / YYYY

Debtor 1 **Steven Dale Deaton**

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Travis Sasser

Signature of Attorney for Debtor

Date

August 30, 2023

MM / DD / YYYY

Travis Sasser 26707

Printed name

Sasser Law Firm

Firm name

2000 Regency Parkway**Suite 230****Cary, NC 27518**

Number, Street, City, State & ZIP Code

Contact phone **919.319.7400**

Email address

travis@sasserbankruptcy.com**26707 NC**

Bar number & State

**United States Bankruptcy Court
Eastern District of North Carolina**

In re **Steven Dale Deaton**

Debtor(s)

Case No.

Chapter

7

VERIFICATION OF CREDITOR MATRIX

The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date: **August 30, 2023**

/s/ Steven Dale Deaton

Steven Dale Deaton

Signature of Debtor

Date: **August 30, 2023**

/s/ Travis Sasser

Signature of Attorney

Travis Sasser 26707

Sasser Law Firm

2000 Regency Parkway

Suite 230

Cary, NC 27518

919.319.7400 Fax: 919.657.7400

Absolute Medical Imaging Inc
Attn: Managing Agent
Dexter, MI 48130

Biomedical Equipment Corp: New Life
Attn: Managing Company
861 SW 8th Street
Miami, FL 33130

Clinical Imaging Mgmt Sys, LLC
Attn: Managing agent
100 N Closner Blvd
Edinburg, TX 78539

American Express
Attn: Managing Agent/Bankruptcy
Post Office Box 981535
El Paso, TX 79998-1535

Block Imaging International, Inc
Attn: Managing Agent
1845 Cedar St.
Holt, MI 48842

Clinical Imaging Mgmt system LLC
Tartant attn Managing agent
200 Feliks Gwozdz Pl
Fort Worth, TX 76104

ANCEC, Asociacion Nacional
Contra e Hospitalar S.A. Casa #21
Calle 67,
SAN FRANCISCO PANAMA

BlueVine
Attn: Managing Agent/Bankruptcy
401 Warren Street
Redwood City, CA 94063

Colonial Family Praticce
Attn: Managing Agent
4700 Forest Drive Suite 101
Columbia, SC 29206

Apple Card/GS Bank
Attn: Managing Agent/Bankruptcy
Lockbox 6112 PO Box 7247
Philadelphia, PA 19170-6112

Boyette Ortho
Attn: Managing agent
2573 Statonsburg Road
Greenville, NC 27834

ConnetWise
Attn: Managing Agent
400 N. Tampa St., Suite 130
Tampa, FL 33602-4717

Ashley Deaton
12201 Beestone Lane
Raleigh, NC 27614

Cape Fear Orthopaedic Clinic
4140 Ferncreek Drive
Ste 801
Fayetteville, NC 28314

Cypress Partners, LLC
Attn: Managing Agent
6018 Christmas Drive
Midland, GA 31820

Bank of America
Attn: Managing Agent/ Bankruptcy
100 North Tryon Street
Charlotte, NC 28255

Caring Medical
Attn: Managing agent
9738 Commerce Center Court
Fort Myers, FL 33908

Cypress Partners, LLC: Milledgeville
Attn: Managing Agent
1850 N. Columbia Street, Suite 3
Midland, GA 31820

Bank of America
Attn: Managing Agent/ Bankruptcy
PO Box 982284
El Paso, TX 79998

Central Imaging and Radiology P.A
Attn: Managing Agent
100 Europa Dr. Suite 417
Chapel Hill, NC 27517

Cypress Partners, LLC:Regional Im
Attn: Managing Agent
2516 University Drive
Thomson, GA 30824

Benjamin S. Morrell
Taft Stettinius & Hollister LLP
111 East Wacker Drive, Suite 2600
Chicago, IL 60601

Clinica La Floresta
Attn: Managing Agent
Soluciones Dicom.
Las Ruices Caracas VENEZUELA

Cyrus Diagnostic Imaging
Attn: Managing Agent
165 Waymont Ct.
Lake Mary, FL 32746

Biomedical Equipment Corp.
Attn: Managing Agent
2606 NW 97 Ave.
Miami, FL 33172

Clinical Imaging Management Systems
Attn: Managing Agent
47 Cellini
San Antonio, TX 78258

Dayspring Family Medicine
Attn: Managing agent
250 W. Kings Highway
Eden, NC 27288

Delta Orthopedics
Attn: Managing Agent
257 Cottonwood St
Delta, CO 81416

Heart Of Texas Healthcare System
Attn: Managing Agent
11419 Mathis Ave #208
Dallas, TX 75234

Interstate Imaging, LLC
Attn: Managing Agent
PO BOX 144
Evansville, IN 47711

Direct Rehab
Attn: Managing Agent
3110 Park Center Drive
Tyler, TX 75701

Hope Imaging
Attn: Managing Agent
1850 37th St #101
Vero Beach, FL 32960

Interstate Imaging, Sport Med Ctr
Attn: Managing Agent
333 S. Kirkwood Rd STE 200
Saint Louis, MO 63122

Doctor's Care
Attn: Managing agent
307 E. Meighan Blvd.
Gadsden, AL 35903

Hospital Narciso Lopez de Lanus
Attn: Managing Agent
Cullen 5769 -Villa Urquiza CABA CP
Buenos Aires ARGINTINA

Interstate Imaging,LLC:Bernie Med
Attn: Managing Agent
741 S WALNUT ST
Bernie, MO 63822-8900

EvoHealth
12201 Beestone Lane
Raleigh, NC 27614

Imerial Imaging Technology
Attn: Managing Agent
320 Northpoint Pkwy Suite P
Acworth, GA 30102

Intuit Financing
Attn: Managing Agent/Bankruptcy
2700 Coast Avenue
Mountain View, CA 94043

FirstScan-ScanMed®
Managing Agent
9840 S. 140th St., Suite 8
Omaha, NE 68138

Imperial Imaging Technology Georgia
Attn: Managing Agent
475 Tribble Gap Rd
Cumming, GA 30040

Iowa Orthopaedic Center, P.C.
Attn: Managing Agent
450 Laurel St., Suite A
Des Moines, IA 50314

Freedom Mortgage Corporation
Attn: Managing Agent/Bankruptcy
951 W Yamato Rd. Suite 175
Boca Raton, FL 33431

InnovaCare
Att: Managing Agent
30701 Lorain Road
North Olmsted, OH 44070

John G. Rhyne
PO Box 8327
Wilson, NC 27893

Genesis Medical Group
Attn: Managing Agent
2255 East Mossy Oaks Rd. Suite 500
Spring, TX 77389

Internal Revenue Service
Centralized Insolvency Operations
P. O. Box 7346
Philadelphia, PA 19101-7346

Joseph P. Sargent
1595 Black Rock Turnpike
Fairfield, CT 06824

Georgia Interventional Medicine
Attn: Managing Agent
3286 Buckeye Road Ste. 130
Atlanta, GA 30341

International Med-X
Attn: Managing Agent
6391 Arc Way
Fort Myers, FL 33966

Kidney Hypertension Transplant
Attn: Managing agent
915 S. Laredo St., Suite 200
San Antonio, TX 78204

Haven Elite Urgent Care
Attn: Managing Agent
P.O. Box 477
Durand, IL 61024

International Med-X-St Eustatius HC
Attn: Manager Agent
H.M. Queen Beatriz Rd 25 St
NETHERLANDS

Lansing Urgent Care
Attn: Managing Agent
505 N. Clippert St
Lansing, MI 48912

Leighton Ortho
Attn: Managing agent
20 Medical Campus Drive
Supply, NC 28462

Medserv Plus, Inc.:Owens State Comm
Attn: Managing Agent
30335 Oregon Rd
East Palestine, OH 44413

Merry Xray Corp. Dr Brahms
Attn: Managing Agent
23250 Mercantile Rd
Beachwood, OH 44122

Leyton US
Attn: Managing agent
2 Avenue de Lafayette, 6th F

Meridian Medical Services
Attn: Managing agent
3266 N. Meridian St. Suite 501
Indianapolis, IN 46208

Merry Xray Corp. Family Health C
Attn: Managing Agent
3310 Magnolia St
Orangeburg, SC 29115

Longhorn Imaging
Attn: Managing agent
4316 James Casey Bld. F, Suite 110
Austin, TX 78745

Merry Xray Corp Terry Reilly
Attn; Managing Agent
848 La Cassia Dr
Boise, ID 83705

Merry Xray Corp. Fastmed ClinicsU
Attn; Managing Agent
935 Shotwell Rd STE 108
Clayton, NC 27520

Manaswi Orthopedic & Joint Replacem
Attn Managing Agent
2231 North Blvd W
Davenport, FL 33837

Merry Xray Corp, Central N. Alabama
110 Walker Ave
Huntsville, AL 35801

Merry Xray Corp. Hagerstown Cor
Attn: Managing Agent
18601 Roxbury Rd
Hagerstown, MD 21746

Med7 Produtos Hospitalares Ltda.
Rua Dr. Tirso Martins 44, Suite 24
Sao Paulo SP 04120-050
Brazil

Merry Xray Corp. 1st Physicians PLL
Attn: Managing Agent
4222 Wendover Ave Ste 600
Odessa, TX 79762

Merry Xray Corp. Little Alsace Ug
attn: Managing Agent
1501 Houston St
Castroville, TX 78009

Med7 Produtos Hospitalares Ltda.:
Centro de Ortopedia e Traumatologia
Av. Souza Naves,1675 centrolvaiporã
PR 86870-000 Brazil

Merry Xray Corp. College HC Prof
2550 North Loop W Ste 300
Houston, TX 77092

Merry Xray Corp. Manys Primary H
Attn: Managing Agent
35055 LA Hwy 16
Denham Springs, LA 70706

Med7 Produtos Hospitalares Ltda
Torre Delta Pico 5 Offc 5B
Urb Bello Campo Municipio
Caracas VENEZUELA

Merry Xray Corp. Cornerstone Reg Ho
2302 Cornerstone Blvd
Houston, TX 77092

Merry Xray Corp. Medina OB
Attn: Managing Agent
3985 Medina Rd STE200
Medina, OH 44256

Medico MD
Attn:: Managing Agent
8150 Springwood Dr. Ste 150
Irving, TX 75063

Merry Xray Corp. Crimson Urgent Car
attn: Managing Agent
1718 Veterans Memorial Pkwy
Tuscaloosa, AL 35404

Merry Xray Corp. Ortho CLinc
Attn; Managing Agent
1540 N Zaragoza Blvd
El Paso, TX 79936

Medserv Plus, Inc.
Attn: Managing Agent
678 East Taggart Street
East Palestine, OH 44413

Merry Xray Corp. Dayton Heart Group
attn: Managing Agent
695 N Clyde Morris BLVD
Daytona Beach, FL 32114

Merry Xray Corp. Orthopedic Spec
Attn: Managing Agent
785 E Holland
Spokane, WA 99218

Merry Xray Corp. Pulmonary
Attn: Managing Agent
1520 S Main St Suite 2
Dayton, OH 45409

Merry Xray Corp:Acute Care Surgery
Attn: Managing Agent
613 Elizabeth St STE 804
Corpus Christi, TX 78404

Mid-South Medical Imaging LLC
Attn: Managing Agent
307 E Meighan Blvd
Gadsden, AL 35903

Merry Xray Corp. Southwest Urgent C
Attn: Managing Agent
2030 N. Messa St
El Paso, TX 79902

Merry Xray Corporation
Attn: Managing Agent
8020 Tyler Blvd./PO BOX 8002
Mentor, OH 44060

Mid-South Medical Imaging LLC
Jefferson COunty Coroner
900 Keystone Ct Unit 957
Pelham, AL 35124

Merry Xray Corp. Springfield
Attn: Managing Agent
2280 Marcola Rd
Springfield, OR 97477

Merry Xray Corporation
MORRILTON MEDICAL CLINIC, P.A.
10 HOSPITAL DR
Morrilton, AR 72110

Mid-South Medical Imaging LLC
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